



## **DIVERSITY AWARDS NOMINATION FORM**

### **ELIGIBILITY REQUIREMENTS**

1. Nominee must demonstrate a commitment to honoring and celebrating diversity in the community of Tempe.
2. Individual nominees must live or work in Tempe. Business/Organization nominees must be located in Tempe.
3. Current elected officials and current Human Relations Commissioners are not eligible for nomination.

### **INSTRUCTIONS**

1. Submit completed nomination form, with information on both the nominee and nominator. Be sure to indicate the category for the nomination (only one category per nominee).
2. Respond to the award questions with a maximum of 2 typed pages.
3. Complete the reference list of two individuals who are familiar with the nominee's background and accomplishments.
4. Mail the nomination form, award questions, and reference list to:

Tempe Human Relations Commission – Diversity Awards  
C/O Carlos Pastor  
31 E. Fifth St.  
Tempe, Arizona 85281

**NOTE:** Nominations must be received/postmarked by no later than Friday, November 30, 2000 at 5:00 p.m. Additional materials (videotapes, photos, articles, etc.) will not be accepted.

This nomination is for the following category (**select only one**):

- ☐ Individual – Adult
- ☐ Individual – Youth (under 18 years old)
- ☐ Business
- ☐ Community Group/Organization
- ☐ Educational Organization
- ☐ Neighborhood Association

### **NOMINEE INFORMATION**

Name of Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

### **AWARD QUESTIONS**

Please submit answers to the following questions with each nomination (maximum of 2 typed pages will be accepted).

1. Describe why this individual/organization exemplifies a commitment to diversity in the City of Tempe.
2. What specific activities by this individual/organization demonstrate this commitment to diversity?
3. Describe any challenges that this individual/organization overcame in implementing these activities/accomplishments.

### **REFERENCE LIST**

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to Nominee: \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to Nominee: \_\_\_\_\_

### **NOMINATOR INFORMATION**

Nominated by: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

